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AO 440 (Rev. 05/00) Summons in a Civil Action

UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF ILLINOIS

SUMMONS IN A CIVIL CASE

Plaintiff

SUSAN TOMAS  
8901 WESTERN-406  
DES PLAINES, IL 60016

CASE NUMBER:

V.

AFSCME: AMERICAN FEDERATION  
STATE COUNTY MUNICIPAL EMPLOYEES  
LOCAL 1006

ASSIGNED 08CV610  
JUDGE BUCKLO  
DESIGNATED MAGISTRATE JUDGE DENLOW

TO: (Name and address of Defendant)

MARK FISHER FISHER - VICE PRESIDENT  
Work Address 2914 WACKER DR  
SUITE 800 CHICAGO, IL 60606

**YOU ARE HEREBY SUMMONED** and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

PRO-SE Susan Tomas  
8901 WESTERN #406  
DES PLAINES, IL 60016

an answer to the complaint which is herewith served upon you within 20 days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

MICHAEL W. DOBBINS, CLERK

**KRYSTEN COPPOLETTA**

(By) DEPUTY CLERK

1-28-08  
DATE

AO 440 (Rev. 05/00) Summons in a Civil Action

## RETURN OF SERVICE

Service of the Summons and complaint was made by me<sup>(1)</sup>

DATE 2-5-08

NAME OF SERVER (PRINT)

Susan Tomas via Registered restricted mail

TITLE

Check one box below to indicate appropriate method of service

☐ Served personally upon the defendant. Place where served:☐ Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.

Name of person with whom the summons and complaint were left:

☐ Returned unexecuted:☒ Other (specify):Sent by Certified mail and 02-05-08  
Restricted delivery see copies  
Received 02-05-08

## STATEMENT OF SERVICE FEES

TRAVEL

SERVICES

TOTAL

## DECLARATION OF SERVER

I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.

Executed on

02-05-08

Date

Signature of Server

VIA REGISTERED MAIL

Susan Tomas

8901 Western #406  
Des Plaines, IL 60016

Address of Server

FILED

FEB 19 2008 YM  
Feb 19, 2008  
MICHAEL W. DOBBINS  
CLERK, U.S. DISTRICT COURT

(1) As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure.

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

PATRICIA OUSLEY  
AFSCME LOCAL 1006  
29 N. NACKER suite 800  
CHICAGO, IL 60606

## A. Signature

X

- ☐ Agent  
☐ Addressee

## B. Received by (Printed Name)

K. Black

## C. Date of Delivery

2/5/08

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

## 3. Service Type

- ☒ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

☒ Yes

## 2. Article Number

(Transfer from service label)

7007 2680 0003 1995 9798

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

RUDLEY HERRON  
AFSCME LOCAL 1006  
29 N. NACKER suite 800  
Chicago, IL 60606

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X

K. Black

- ☐ Agent  
☐ Addressee

## B. Received by (Printed Name)

K. Black

## C. Date of Delivery

2/5/08

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

## 3. Service Type

- ☒ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

☒ Yes

## 2. Article Number

(Transfer from service label)

7007 2680 0003 1995 9804

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

Mark Fisher  
AFSCME LOCAL 1006  
29 N. NACKER suite 800  
Chicago, IL 60606

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X

K. Black

- ☐ Agent  
☐ Addressee

## B. Received by (Printed Name)

K. Black

2/5/08

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

## 3. Service Type

- ☒ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

☒ Yes

## 2. Article Number

(Transfer from service label)

7007 2680 0003 1995 9781

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Susan Tomas  
8901 Western #406  
DES PLAINES, IL 60016

370



UNITED STATES POSTAL SERVICE

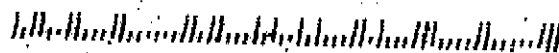


First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

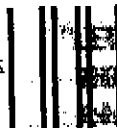
Susan Tomas  
8901 Western #406  
DES PLAINES, IL 60016

37



UNITED STATES POSTAL SERVICE

CHICAGO IL 606



DATE TO BE PAID  
FIRST CLASS MAIL  
POSTAGE & FEES PAID  
USPS  
PERMIT NO. G-10

05 FEB 2008 PM 3 1

• Sender: Please print your name, address, and ZIP+4 in this box •

Susan Tomas  
8901 Western #406  
DES PLAINES, IL 60016

337

